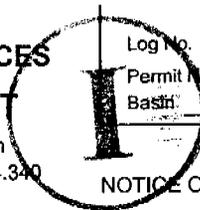


WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340



Log No. 90293
 Permit No. _____
 Basin 137-B
 NOTICE OF INTENT NO. 50849

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Round Mountain Gold Corp. #9 ADDRESS AT WELL LOCATION Round Mountain Gold minesite, Round Mountain, NV.
 MAILING ADDRESS P.O. Box 480
Round Mountain, NV 89045

2. LOCATION NW 1/4 NW 1/4 Sec. 29 T 10N N/S R 44E E Nye County
 PERMIT NO. M/Q-2002-9 N/A N/A
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Domestic
 Deepen Abandon Other _____ Municipal/Industrial

4. PROPOSED USE
 Irrigation Test Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Gray rock		0	80	80
Light gray rock		80	115	35
Gray rock		115	185	70
Light gray rock		185	220	35
Gray rock		220	300	80
Fractured gray rock		300	330	30
Gray rock		330	435	105
Light gray rock		435	490	55
Fractured gray rock	35 gpm	485	595	110
Gray rock, light gray rock	40 gpm	495	595	100
Gray rock		595	655	60
Fractured gray rock		655	660	5
Gray rock		660	680	20
Dark gray rock		680	720	40

Construction Detail:

Cement	0	5	5
Hole plug	5	480	475
Gravel pack	480	720	240

8. WELL CONSTRUCTION
 Depth Drilled 720 Feet Depth Cased 720 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
12.25	0	20	0	20
6.5	20	720	20	720

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	22.36	0.250	0	20
2.375	3.653	0.154	+2	720

Perforations:
 Type perforation Mill Slot
 Size perforation 0.010"
 From 480 feet to 710 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 480' (See Detail) Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 480 feet to 720 feet

9. WATER LEVEL
 Static water level 235 feet below land surface
 Artesian flow N/A G.P.M. N/A P.S.I.
 Water temperature 100 °F Quality Poor

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Lang Exploratory Drilling Contractor
 Address P.O. Box 5279 Contractor

Elko, NV 89802-5279
 Nevada contractor's license number issued by the State Contractor's Board 0021976

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2204

Signed Caleb Roberts
 By driller performing actual drilling on-site or contractor
 Date 5/17/02

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>5</u>	<u>Not Meas.</u>	<u>3 Hours</u>

BST/L